FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information	ation														
Name and Mailing Address of Respondent	of Responder	#													
Union Telephone Company PO Box 160 Mountain View, WY 82939	ompany Y 82939												is a	Check here if this is a change of address.	
2. Year Report Filed		3. Report	ing Period (Er	3. Reporting Period (Ending Date of Pay	ay		4. Number	Number of Full-Time Employees during Selected	mnlovees du	ring Selected					
2019		Ma ₁	Period Covered by Report) March 15, 2019	eport) 019			Reporting a. Fe	Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only)	k one): complete Se	ctions I, IV, an	d V only)				
SECTION II - Full-Time Employees.	yees.							To or more (complete all sections)	plete all sec	lions)					
							Nun (Report emp	Number of Employees	yees						
Job								Race/Ethnicity	_						
Categories	Ξ	Hispanic or Latino						Not-Hispan	Not-Hispanic or Latino						Total
					Male	ale					Female	nale			Columns
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	2
	Þ	В	C	0	т	TI	9	н	-	٦	7	г	3	z	0
	:		5						1						6
Managers 1	1.2	_	29						22					2	55
Professionals	2 2	_	33		_				6						43
	ω		42			-		1	ω						47
	1	5	2					-	30					2	41
Cappoir	On On	2	1						25						28
ers	6		8												∞
	7		w												3
pers	00		15						-						16
lorkers	9														0
		9	138	0	1	-	0	2	88	0	0	0	0	4	247
PREVIOUS YEAR TOTAL 11	5	w	143	-	-	-	2	_	105	0	0	0	0	3	265

								Nui (Report emp	Number of Employees (Report employees in only one category)	oyees one categor	γ)					
Job									Race/Ethnicity	ty						
Categories		Hisp	Hispanic or Latino						Not-Hispa	Not-Hispanic or Latino						
		An orași					Male					Fer	Female			Columns
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	A-N
		Þ	В	C	0	ш	П	G	I	-	-	r ioidi idei	-		:	
Executive/Senior Level Officials and Managers	1.1											7		3	z	0
First/Mid-Level Officials and Managers	1.2															0
Professionals	2			2						-						0
Technicians	ω															C.
Sales Workers	4															0
Administrative Support Workers	5									۵.					-	2
Craft Workers	o o															\ u
Operatives	7															0
Laborers and Helpers	œ															0
Service Workers	0															0
TOTAL																0
CIA	10	0	0	2	0	0	0	0	0	5	0	0	0	0	1	∞
TREVIOUS TEAR TOTAL	11	0	0	S	0	0	0	0	0	O1	0	0	0	0	0	10
SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	criminati	on Complai	ints Pursuan	t to 47 CFR 2	22.321, 23.55,	, 90.168, 101.	4, and 101.31	1.3								
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition. SECTION V - Certification	the Comany body any body the Comacating pa	mission that having com having com mission that riles involved	no complaint petent jurisdit the following d, date filed, o	s regarding viction in such complaints al complaints al	iolations of the matters during lleging violation noies before w	e equal emplo g the calendar ons of the prov	yment provisi year covered isions of any er has been h	ions of Federa d by this repor equal employ leard, file num	al, state, territo t. ment opportui iber or other d	orial, or local s nity statute ha lesignation, a	statutes have ave been filed nd current sta	local statutes have been filed against this tute have been filed against this company tion, and current status or disposition.	inst this ompany.			
I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.	knowledg	je, informatic	on, and belief,	all statement	ts in this repo	rt are true and	correct.									
03/26/2019	Johr	Typed or Printed Name of Pe John G. Woody	Typed or Printed Name of Person Signing John G. Woody	Signing		N 9	Signature	W.		11		(A) e	Telephone No. 307-782-6131	-6131		
CEO				8	VILLEULLY F4	WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE DIVISIONALLY FALSE STATEMENTS.	MENTS MADE	ON THIS E		1						